#### **VERMONT HEALTH CONNECT**

MEAB UPDATE
OCTOBER 26, 2015



#### Overview

- 2016 Open Enrollment
- Operations
- Enrollment Numbers
- Outreach & Education
- 2017 Health Plans



## 2016 OPEN ENROLLMENT



#### 2016 Open Enrollment

- Overview: New Enrollments and Renewals
- 2016 Health Plans and Rates



#### 2016 Health Plans

- New Gold HDHP from both carriers
- Carriers requested, and Green Mountain Care Board approved, smaller premium increases for 2016 than last year.
  - BCBSVT premiums up 5.9% on average, compared to 7.7% last year.
  - MVP premiums up 2.4% on average, compared to 10.9% last year.
- HDHPs increased more than standard deductible plans.
  - The Second Lowest Cost Silver Plan, which serves as a benchmark for financial help, is an HDHP.
  - As a result, increase in financial help outpaced the rate increase for many customers who qualify for APTC and/or VPA.

#### Cost of 2016 Health Plans

- In 2016, a couple earning \$50,000 per year will pay \$435 for a Standard Silver plan (after receiving \$533 in APTC and VPA). In 2015, they would have paid about \$20 more.
- In 2016, an individual earning \$30,000 per year will pay \$187 for a Standard Silver 73 plan with cost-sharing reductions. In 2015, they would have paid about \$10 more.
- Vermonters can see estimated financial help for their household size and income by clicking on the Subsidy Estimator at VermontHealthConnect.gov



## **OPERATIONS**



#### Change Requests

- Self-service functionality was opened for many types of changes earlier this month.
- Vermont Health Connect continues to receive approximately 125 change requests per day.
- Vermonters can expect a change requested by the 15<sup>th</sup> of a month to be reflected on the next month's invoice.



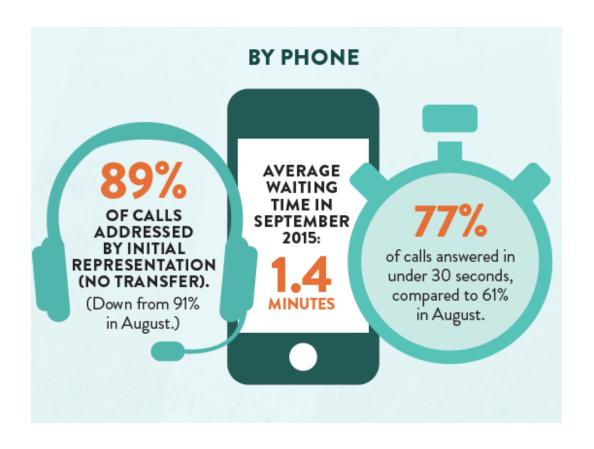
## System Performance

#### **Average Page Load Time (seconds)**





#### Customer Support Center





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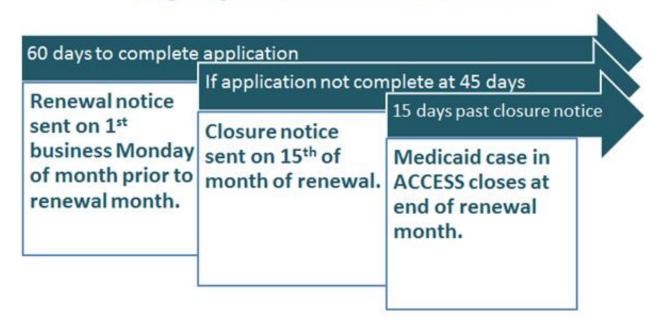
#### Calls Answered within 30 Seconds





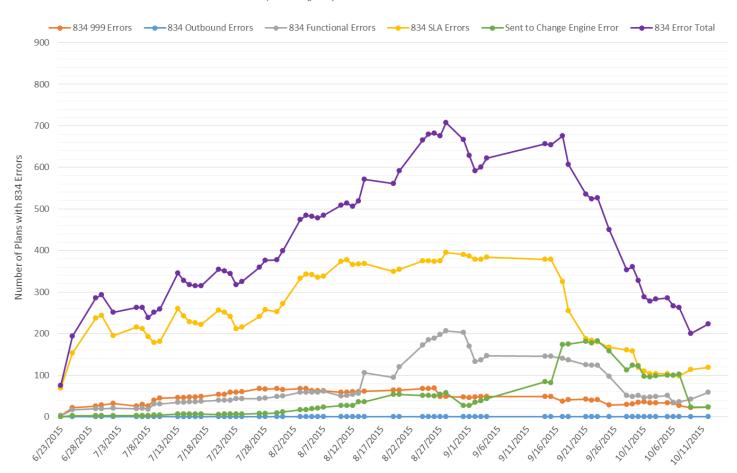
#### **Medicaid Renewals**

#### **Legacy Medicaid Renewals**





#### Carrier Integration – 834 Errors

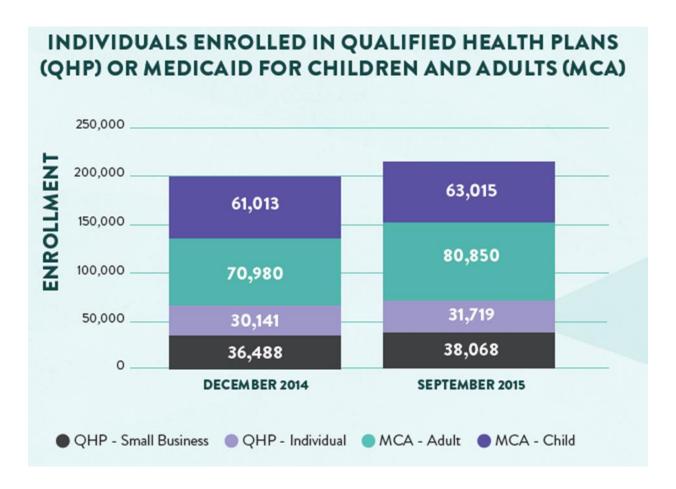




## **ENROLLMENT NUMBERS**



#### Lives Covered in Vermont





Effectuated enrollments for Small Business QHP (direct enrolled) as reported by insurers to VHC. Dec. 2014 Individual QHP as reported by insurers to the Centers for Medicaid and Medicare Services (CMS). Sept. 2015 Individual QHP as reported by insurers to VHC. Medicaid for Children and Adults (MCA) as reported by Vermont Health Connect and Vermont's legacy ACCESS system. MCA

includes Dr. Dynasaur and CHIP but does not include Medicaid for the Aged, Blind, and Disabled (MABD).

#### **OUTREACH & EDUCATION**



#### Outreach and Education Program

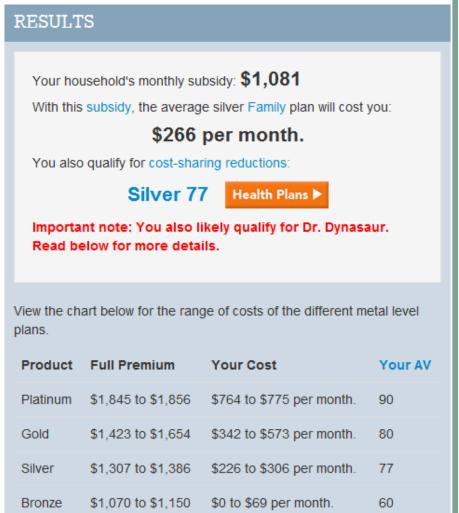




#### Financial Help - 2016

#### VERMONT HEALTH CONNECT 2016 Subsidy Estimator





#### Health Insurance 101 Events



- Last two in this series:
- Johnson: October 28, 6:00-7:30pm Johnson Public Library
- Swanton: November 7,10:00-11:30am Swanton Public Library



For details on upcoming events, visit <u>VermontHealthConnect.gov</u> or call 1-855-899-9600 (toll-free).

Stay connected with the latest news and updates through

<u>Facebook.com/VermontHealthConnect</u> and <u>Twitter.com/vthealthconnect</u>.

### PLANNING FOR 2017 QUALIFIED HEALTH PLANS



# **2017 Planning for 2017 QHPs Work Group Composition**

- Vermont Health Connect
- ➤ Carriers: BCBSVT, NEDD, MVP
- >MEAB Representatives
- Vermont Legal Aid
- Department of Financial Regulation Staff
- Green Mountain Care Board Staff



# 2017 QHP Planning Study & Approach

- Findings from the Vermont Household Health Insurance Survey (DFR)
- Internal Vermont Health Connect enrollment and renewal data
- Claim trend data from Vermont insurance carriers
- External sources, i.e. 2015 Robert Wood Johnson marketplace study



# 2017 Qualified Health Plans Values

- >Provide compliant "Essential Health Benefits"
- >Minimize overall premium cost impact
- Focus on plan benefit designs to entice the "invincible" age cohort 25-34

Create/maintain incentives for generic low-cost prescriptions, primary & behavioral health care



## 2017 Qualified Health Plans Values—Continued

- Emphasize customer understanding of plan choice through education & outreach
- Simplify choices and information for all QHP consumers

>Emphasize wellness benefits and incentives



## 2017 Qualified Health Plans Outreach & Education Priorities

Improve general awareness of how health insurance works

Improve consumer awareness of preventive services covered at zero cost-share including immunizations, well-visits, GYN

Focus on customer education around appropriate plan choice



# 2017 Qualified Health Plans Outreach & Education Priorities -Continued-

- Improve customer understanding of the APTC and importance of reporting income and household changes to VHC
- Increase awareness of Special Enrollment Period for change in CSR level or new eligibility for APTC
- Carriers to focus on increasing awareness of wellness benefits within their products



#### 2017 QHP Planning

#### Next Steps

- Analyze 2017 federal AV calculator and benefit changes required for standard QHPs (November)
- Consider ways to preserve or lower benefit cost-share particularly with prescription drugs, primary & behavioral health care
- ➤ Prepare presentation & approval of 2017 QHP benefit designs for GMCB (January 2016)



# 2017 Qualified Health Plans Feedback

#### **Questions & Suggestions Welcome**:

Dana Houlihan
Vermont Health Connect

dana.houlihan@vermont.gov

802-585-4140

